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July 26, 2005

From: Curtis A. Vock

Matter No.: 409512

To:	Company:	Fax Number:
Examiner Craig S. Smith Commissioner for Patents Technology Center 2857	United States Patent Office	(571) 273-8300

Number of Pages Transmitted (including this cover sheet): 5

RE: Application No.: 10/601,208
Filing Date: June 20, 2003

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OICE/IAP

Dear Sir/Madam:

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We attach the following items pertaining to the above-referenced file:

1. Transmittal (1 page)
2. Notice of Appeal from the Examiner to the Board of Patent Appeals and Interferences in duplicate (2 pages)
3. Certificate of Facsimile Transmittal (1 page)
4. This facsimile cover sheet (1 page)

Sincerely,

Curtis A. Vock


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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

CERTIFICATE OF TRANSMISSION (37 CFR 1.8) Applicant(s): Curtis A. Vock et al.			Atty Docket No. 409512
Serial No. 10/601,208	Filing Date June 20, 2003	Examiner Craig S. Miller	Group Art Unit 2857
<p>Date of Transmittal: <u>26 July 2005</u></p> <p>I hereby certify that the following documents:</p> <ol style="list-style-type: none">1. Transmittal (1 page)2. Notice of Appeal from the Examiner to the Board of Patent Appeals and Interferences in duplicate (2 pages)3. Facsimile cover sheet (1 page)4. This Certificate of Facsimile Transmittal (1 page) <p>are being transmitted via facsimile number (571) 273-8300, to MAIL STOP: AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date above.</p>			
		Karen Jodzio-Head	
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FTO/SB/21 (04-04)

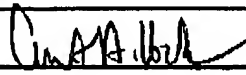
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/601,208	
	Filing Date	June 20, 2003	
	First Named Inventor	Curtis A. Vock, et al.	
	Art Unit	2857	
	Examiner Name	Craig S. Miller	
Total Number of Pages in This Submission	5	Attorney Docket Number	409512

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmittal; Fax Cover Sheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Curtis A. Vock Lathrop & Gage, LC
Signature	
Date	July 26, 2005

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO, Fax Number (571) 273-8300 on the date below:			
Typed or printed name	Karen Jodzlo-Head		
Signature		Date	July 26, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 409512
I hereby certify that this correspondence is being facsimile transmitted to "Mail Stop: AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450", Fax Number (571) 273-8300 on <u>July 26, 2005</u> .	In re Application of <u>Curtis A. Vock, et al.</u>	
	Application Number <u>10/601,208</u>	Filed <u>June 20, 2003</u>
	For PRODUCT INTEGRITY SYSTEMS AND ASSOCIATED METHODS	
	Art Unit <u>2857</u>	Examiner <u>Craig S. Miller</u>
Signature <u>Karen Jodzlo-Head</u>		
Typed or printed name <u>Karen Jodzlo-Head</u>		
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner.		
The fee for this Notice of Appeal is (37 CFR 1.17(b)) <u>\$ 500.00</u>		
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <u>\$ 250.00</u>		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
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<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>12-0800</u> . I have enclosed a duplicate copy of this sheet.		
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the		
<input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)		
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>38,356</u>		
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		
<u>Curtis A. Vock</u> Signature		
<u>Curtis A. Vock</u> Typed or printed name		
<u>(720) 931-3011</u> Telephone number		
<u>July 27, 2005</u> Date		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		

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